



HSOMC and MMKC Spay/Neuter/Vaccine/Microchip Application

Please complete a separate application for each dog.

You must be a resident of Midland, Bay, Saginaw, Ogemaw, Gladwin, or Clare County in order to apply.

Name: _____ Dog's Name: _____

Street Address: _____ City/Zip: _____ County: _____

Email: _____ Phone: _____ (home/cell?) Alternate Phone: _____

How long at this address? _____ If less than 1 year, previous address: _____

Breed(s) of Dog: _____ Male/Female? (Circle One) Age of Dog: _____

Current veterinarian: _____ At: _____ (Clinic Name)

Is your dog current on vaccinations? Yes/No (circle one) Is your dog microchipped? Yes/No

Would you like your dog vaccinated? Yes No Vaccines Needed: _____

Would you like your dog microchipped? Yes No

Total Household Income: (circle one) \$0-10,000 \$10,000-\$20,000 \$20,000-\$30,000

\$30,000-\$40,000 \$40,000-\$50,000 \$50,000 or above # of Members in Household: _____

Your application WILL BE considered regardless of your income

Are there any circumstances that you would like the MMKC and HSOMC to be aware of in considering this application?

Disclaimer: The undersigned acknowledges and agrees that the Humane Society of Midland County and the Midland Michigan Kennel Club, their employees, agents, and members shall not be responsible for any and all claims arising out of any injuries or harm that may occur during the Course of surgery, vaccinations, and microchipping, and any related medical care. By my signature below, I acknowledge that I have read and understand the application and agree to abide by all terms of this agreement.

Signature: _____ Date: _____